

Prevention Framework

TPCHD Prevention Efforts Use an Ecological Perspective. . .

- Complex behaviors such as tobacco use, alcohol misuse and violence are created and sustained through many interconnected factors. Individual characteristics, family dynamics, peer relationships, organizational structures, institutional policies and programs; advertising and media all play an important role.
- Every major sector of the community: business, law enforcement, the spiritual community, educational institutions, health care organizations, social service agencies, health providers, local government, the media etc. has essential contributions to make to prevention. A wide variety of strategies must be implemented to achieve a change in community norms.

Informed by Research . . .

- Prevention plans, goals, objectives and activities will be chosen on the basis of how consistent they are with the epidemiology of the problem as well as program evaluation literature. Best practices will form the foundation for all prevention activities.
- Approaches that are identified as “promising” will be included in plans based on their feasibility and fit with other departmental strategies and priorities.
- Plans will avoid the inclusion of approaches that have been identified as ineffective.
- Plan revisions will occur at least yearly and will be based on the most currently available information regarding best practices, community assessment information, tracking and monitoring of specific prevention campaigns, and available departmental resources. Tracking TPCHD activities and monitoring routine data reports of key community indicators will help to answer the following important questions:
 1. Is TPCHD carrying out activities as intended by the work plans?
 2. Are positive changes occurring in the community?
 3. Are health and behavior outcomes moving in the anticipated direction?

Implementing Population-Based Approaches . . .

- Treatment of high-risk individuals is a necessary but insufficient approach to prevention in the community. Treatment does not address many factors in the environment that continue to foster risk behaviors. TPCHD must address these broader environmental factors in order to achieve countywide improvements in health.
- Changing complex health-related behaviors requires a focus on multiple audiences. In some cases, the groups are relatively small. In others, entire organizations or a large segment of the county population may be the audience of interest. Audiences for population-based prevention should be the largest group for which an effective prevention strategy is available.
- Appropriate audiences are determined through an understanding of the epidemiology of the behavior, knowledge of the relative effectiveness of prevention strategies, consideration of available resources, and community readiness.

Tailored to Community Needs . . .

- In addition to the research literature, quantitative and qualitative assessments provide valuable information about underlying disease and injury patterns, health topics of community interest, and community infrastructure and decision-making processes. The assessment process identifies key resources, prevention needs, and gaps between available resources and identified needs. Assessments also identify starting points for departmental promotion of prevention activities, provide guidance for how to tailor prevention strategies to local conditions, determine community readiness to embrace prevention activities, and assist in the measurement of progress toward department objectives.
- Integration between research-based strategies and community needs and readiness is essential to assuring effective and sustainable efforts. For this reason, several best practice options will be available at the district level. TPCHD staff will be expected to tailor programs according to research as well as community needs and resources.

Sustained through Community Commitment. . .

- Local health departments do not have sufficient resources of their own to change community norms and behaviors around tobacco, alcohol, and violence. Resources of the entire community must be mobilized in order for prevention efforts to be successful.
- Sustained community commitment is dependent on the development of community capacity. Developing community capacity involves increasing the knowledge by key stakeholders of public health issues, increasing motivation and commitment to address them, enhancing the effectiveness of existing resources, and fostering coordination among diverse community prevention efforts.
- The development of community capacity will result in increased abilities by communities to take leadership roles, facilitate community decision processes, and identify, prioritize, plan, implement and coordinate local prevention efforts. Networks of increasingly committed and capable community members will make coordinated countywide efforts possible and assure that such efforts are sustainable.

And Guided by TPCHD Leadership.

- TPCHD will begin prevention efforts in areas that are consistent with existing departmental resources, structures, and commitments. This involves the identification of arenas which are consistent with the primary prevention and population-based mission of the Department, that do not replace efforts by other agencies, and to which best practice research can provide guidance for effectiveness, integration and sustainability.
- The Department is committed to a planning process that learns from initial efforts and revises organizational structures and resource allocations as needed.
- The long-range objective is to achieve a broad consensus among key stakeholders about how best to address prevention and make the best use of the talents, skills and resources of the entire Pierce County community.

Tobacco Prevention Plan Overview

- Twenty-five percent of the adults in Pierce County smoke cigarettes. In 1964 the Surgeon General released a report saying that tobacco products caused lung cancer, and heart disease. Today tobacco is still the leading cause of preventable death. Each year in the United States 413,000 people die from tobacco related illnesses. In Pierce County 1,072 people die each year from tobacco related illnesses.
- The climate for tobacco use has changed in our society over the past 35 years. Many laws have been passed to restrict advertising both nationally and locally. All states have clean indoor air policies that restrict or eliminate smoking in workplaces and public places. The recent tobacco settlement mandated the removal of all tobacco billboards allowing us to finally remove the last remaining billboards in Pierce County on the I-5 corridor. The Youth Access Prevention Funds from the State Department of Health provide funds to TPCHD to insure that the Youth Access Law, which makes it illegal to sell tobacco products to minors, is enforced and make it possible to monitor compliance of Pierce County's tobacco advertising bans.
- The primary objective of the tobacco plan is to increase the capacity of the community to change the norms around tobacco use through partnerships of various sectors and to prevent youth from starting tobacco use. Research shows that school-based prevention programs alone have not been shown to have a sustainable effect on the reduction of youth use in the absence of larger community efforts. Key stakeholders will be identified to increase community involvement and ownership of tobacco use prevention efforts in the community.
- The tobacco plan is research-based relying on years of evaluation of effective interventions. By applying effective models of behavior change theories, effective community development strategies, and community-based prevention strategies, the implementation of the tobacco plan is expected to reduce tobacco use among Pierce County residents.
- The research tells us that the primary factors contributing to youth uptake of tobacco use are: parent smoking, friend smoking, older sibling smoking, and advertising and the media. Research also tells us that most smokers want to quit. We know however, that it takes most smokers about 5 serious attempts before they are able to quit for good. Encouraging people to quit smoking and providing the infrastructure in the community for increased attempts will most likely result in reduced use.
- The tobacco plan focuses on four key areas: policy, environmental tobacco smoke, prevention of youth uptake, and cessation. Research tells us that if these four aspects of the plan take root in the community, the necessary normative change will begin to take place. While the strategies for implementing the four key areas of the plan may change, it is unlikely that the direction will change because the plan is comprehensive and based on models from the Center for Disease Control.

TPCHD Tobacco Use Prevention Plan

I. Board of Health Objective

Reduce adult tobacco use by 40% (from 25% to 15%).

The estimated direct annual health impact on Pierce County residents of achieving this objective:

240 fewer deaths	from 1,072 deaths/year to 644 deaths/year
832 fewer years of potential life lost	from 3,275 YPLL to 2,443 YPLL
5,108 fewer days of inpatient hospitalizations	from 19,146 days to 14,038 days
12,640 fewer outpatient visits	from 53,000 to 40,360

II. Plan Objectives

Prevent early initiation of tobacco use by youth, especially among 6-8 graders

Sixty percent of all current smokers began smoking by age 14 and 80% by age 18. Nicotine, a naturally occurring chemical in tobacco, is a powerful multipurpose drug that is used as both a stimulant and a depressant. It is often a child's first experience with using a mood altering addictive substance to dose him or herself for a psychological effect. Nicotine is a highly addictive drug with both short and long term negative health effects. Tobacco is a "gateway" drug. Early use is associated with an increased likelihood for using other illicit substances. Altering youth's perceptions of use among adults and peers and strengthening policies to discourage use are essential components in reducing the incidence of experimentation.

Reduce prevalence of use among adults and youth

High School senior tobacco use rates mirror adult rates in Pierce County – 25%. Tobacco use is the leading cause of death and disease in Pierce County taking the lives of 1,072 people every year. The nicotine in tobacco is more addictive than heroine. Tobacco use kills four times as many people than heroine, cocaine, alcohol, car accidents, suicides, homicides, and AIDS combined. Nicotine develops into a true dependence or addiction in most people who use it regularly. It takes a smoker approximately five serious quit attempts before quitting for good. Encouraging people to quit smoking through appropriate educational campaigns and programs will result in reduction of use.

III. Strategies

- **Increase the visibility and effectiveness of current tobacco laws and policies.**
 - **Reduce the amount of tobacco experimentation among youth.**
 - **Reduce the amount of exposure to environmental tobacco smoke.**
 - **Decrease the smoking rate among adults and youth.**
- A. Conduct a countywide cessation communications campaign.
 - B. Develop and strengthen community networks to address tobacco use prevention and reduction.
 - C. Reduce availability of tobacco products to youth.
 - D. Establish community systems for enforcing the Youth Possession Law.
 - E. Increase the number of smoke free workplaces.
 - F. Increase the number of smoke free restaurants.
 - G. Strengthen school-based prevention programs and policies.
 - H. Increase community-based prevention programs.
 - I. Increase cessation attempts by smokers.

IV. Priority Activities

A. Conduct a countywide cessation communications campaign

- Objective** To reduce the number of smokers in Pierce County and increase general awareness of the harmful effects of tobacco use.
- Audience** Males between the ages of 35 and 45
- Background** Pierce County data shows that there is a higher percent of male smokers in this age group than in any other age group. This age group is more likely to have children and be concerned with the image they give to their children and the long-term health impact of tobacco use. Group Health Cooperative in Pierce County is seeing an unusual number of males in this age group in the emergency room for smoking related problems i.e. heart attacks.
- Activities**
- Research**
1. Research the data on the reasons why people quit.
 2. Identify possible outlets for the campaign.
 3. Identify ad agency to develop the messages.
 4. Identify language, symbols, and credible message carrier.
- Message Design**
1. Provide ad agency with research information.
 2. Test message concepts on target audience.
 3. Review concepts for campaign.
 4. Choose campaign approach.
 5. Review and accept final product for production.
- Production and distribution of media materials**
1. Produce materials for designated outlets: theaters, transit, posters, and billboards.
 2. Send materials to designated outlets.
 3. District teams will place the posters in the community.

B. Develop and strengthen community networks

- Objective** Increase the capacity of the community to address tobacco issues and build sustainable infrastructures in the community for tobacco use prevention.
- Audience** Key stakeholders and organizations

Background Research tells us that if we are going to reduce tobacco use, we must have community involvement. In states where tobacco use has been reduced we find the following components: community-based programs; school-based programs; cessation opportunities; public awareness and education campaigns; laws and policies restricting access, possession, and ETS. Studies have shown that when a community works in concert with schools to coordinate prevention efforts, school-based programs have stronger outcomes.

Activities **Identify key stakeholders**

1. Assess who in the community is involved in tobacco related issues.
2. Make contact with stakeholders.
3. Participate in appropriate meetings and share the tobacco plan with stakeholders.
4. Provide education and training for key stakeholders/community groups around tobacco.
5. Convene a countywide advisory group.

Build Partnerships

1. Enter into partnerships where community agendas coincide with the TPCHD agenda.

C. Reduce availability of tobacco products to youth

Objective Reduce both real and perceived availability of tobacco products to under age youth and increase the compliance of the retailers. Increase the commitment and knowledge of the community.

Audience Merchants, youth, and parents

Background The Youth Access Law prohibits the sale of tobacco products to minors. Youth obtain tobacco products from their friends, older youth, purchasing from stores that do not comply with the law, older siblings, theft, and parents (with or without consent). Data from the Health Department and Liquor Control Board show that 10.5% of attempts by minors to purchase tobacco are successful. Research shows that the perception of the ability to purchase tobacco has an impact on attitudes toward use.

Activities **Conduct compliance checks**

1. Conduct compliance checks in accordance with the consolidated contract and Youth Access Law stipulations.
2. Increase compliance checks to include 90% of all merchants where youth can be used to conduct organized buys.
3. Work with the Liquor Board to ticket stores not in compliance with the law.
4. Recruit and train youth between the ages of 13 and 16 to conduct the checks.
5. Conduct operation storefront.
6. Report findings to the state and the PHSS staff.
7. Do merchant education in stores that break the law.
8. Do ongoing merchant education.

Involve the community

1. Report findings to the community.
2. Engage the community in applying pressure on stores that sell to minors.
3. Engage the community in rewarding stores that do not sell to minors.

4. Educate the community about the law.

D. Establish community systems for enforcing the Youth Possession Law

Objective	To engage the local communities in enforcing the youth possession law in a positive manner offering an educational alternative to punishment for youth that break the law. Establish the community norm that the community will not tolerate breaking the law.
Audience	Law enforcement, school districts, judicial system, parents, youth, community groups (i.e. Girl Scouts, Rotary etc.) and other interested parties
Background	A youth possession law was added to the youth access law (which prohibited youth to buy or obtain tobacco) in 1997 making it against the State law for youth under the age of 18 to possess tobacco products. Local courts have been given jurisdiction from the municipal and district courts to enforce the law. Local law enforcement in the local jurisdictions is the enforcement arm. Possession is a class 3 civil infraction and is subject to a fine or participation in 4 hours of community service, or both. The court may also require participation in a smoking cessation program. Educational alternative to fines send a message to youth that society does care about them and their health rather than making them outlaws. Local communities can change social norms by developing and enforcing the possession law; sending a message to youth that the public is not complacent about tobacco use by youth.
Activities	Engage the community <ol style="list-style-type: none">1. Identify key stakeholders.2. Gather data.3. Assess community readiness.4. Provide information on the law.5. Gather key stakeholders to develop a system of enforcement.6. Educate the community about the law and the system.7. Implement plan.

E. Increase number of smoke free workplaces/public places

Objective	Increase the number of businesses that have smoke free policies. Encourage business that are in compliance with the clean indoor air act to expand their policies to apply to areas that may not fall under the jurisdiction of the law i.e. businesses with warehouses. Provide employees with information on their health benefits regarding coverage of cessation programs/provide cessation programs on site.
Audience	All businesses with emphasis on businesses that hire young people
Background	The clean indoor air act provides protection to office workers and areas of businesses with public access. The law does not cover workplaces such as warehouses where parts of the work environment are open to the out-of-doors and restaurants. Research shows that the majority of smoking employees support smoke free workplaces. Epidemiology shows that Environmental Tobacco Smoke (ETS) causes lung cancer and heart disease in non smokers as-well-as triggering asthma attacks, increasing the irritation of the eyes and nose, and increasing susceptibility to the flu and colds. ETS is classified as a class A carcinogen in the

same category as aspects and causes more than 53,000 deaths a year in the US each year.

Activities

Community education

1. Develop a smoke free workplace brochure.
2. Educate the community about the detrimental effects of environmental tobacco smoke.
3. Identify businesses without smoke free policies.
4. Identify key businesses and make personal contact.
5. Conduct presentations to groups where business members attend.

Support businesses

1. Provide education and technical assistance to businesses wanting to go smoke free.
2. Assist businesses with identifying cessation support for employees.
3. Help businesses promote cessation benefits/programs.

Implement new regulations

1. Research possibilities for new laws or regulations
2. Establish community readiness
3. Pass laws when deemed appropriate

F. Increase the number of smoke free restaurants

Objective

Increase the number of restaurants with smoke free policies. Encourage restaurants to voluntarily go smoke free.

Audience

Restaurant owners, employees, and general public

Background

California and other states have passed smoke free restaurant laws. Studies show that restaurants do not lose business but in fact gain business when they go smoke free. Restaurants are workplaces as well as serving the public. Restaurant employees can hold their employer's responsible if they suffer medical problems from exposure to secondhand smoke. In Pierce County, the Puyallup city council passed a referendum to make all restaurants smoke free but rescinded the referendum when faced with a potential law suit. Public readiness is an important component of passing local or county smoke free restaurant regulations. King County has achieved a 70% smoke free restaurant rate with an ongoing one-on-one education campaign. Seventy five percent of Pierce County residents are smoke free establishing a norm that supports smoke free restaurants.

Activities

Education of restaurant owners

1. Develop educational materials/packets.
2. Integrate education process into TPCHD's Food and Community Safety Department.
3. Health Department Food Inspectors will educate restaurant owners.
4. District staff will follow-up from initial contact.
5. District staff will offer support to restaurants that want to go smoke free.

Educate restaurant workers

1. Develop/purchase materials to educate restaurant workers about the harmful effects of environmental tobacco smoke and their right to work in a smoke free work environment

- at “Food Handlers Card” classes.
- 2. Conduct presentations to restaurant managers credential classes.

Educate the public

- 1. Educate the public about the harmful effects of environmental tobacco smoke.
- 4. Provide materials to the public to encourage restaurants to go smoke free.

Implement new regulations

- 4. Research possibilities for new laws or regulations
- 5. Establish community readiness
- 6. Pass laws when deemed appropriate

Strengthen school-based prevention programs and policies

Objective Increase the effectiveness of school-based programs and policies through providing education to the schools on best practice curricula, the importance of tobacco policies using educational alternatives for violations of laws regarding tobacco use and possession, and helping schools build partnerships with community groups.

Audience Schools – primary, middle, secondary, collages, trade schools

Background Educational institutions provide controlled environments where large numbers of youth and young adults spend significant amounts of time. By law all public schools K-12 must be smoke free and all school districts must have policies to address tobacco use. Very few curricula have been evaluated for long-term effectiveness. The Centers for Disease Control (CDC) recommends that there be consistent tobacco education from kindergarten through twelfth grade with additional attention during middle school. Studies show that when school efforts are combined with community efforts, effectiveness increases. Schools should at least be using curricula that address the essential components as laid out by CDC. There are general substance abuse curricula that can be used in place of tobacco only curricula.

Activities Tobacco Free Kids Club

- 1. Develop educational materials/packets.
- 2. Conduct evaluation of the effectiveness of the intervention.
- 3. Promote the program in the schools.
- 5. Train groups of teachers in tobacco prevention if needed.

Teens against Tobacco Use (TATU)-cross-age education

- 1. Train trainers for schools that are integrating this program into their broad-based tobacco prevention strategies.
- 2. Insure a system is in place to sustain the program and connect the youth to a broader prevention network.
- 3. Advise schools using this program on the broader issues related to prevention.
- 4. Support schools with minimal funding if funding is available.

Build relationships with the school districts

- 1. Sit on substance abuse council or other councils pertinent to the prevention work.
- 2. Connect schools to key stakeholders in the community and help to foster school/community partnerships.
- 3. Provide schools with best practice information.
- 4. Assist schools in developing effective tobacco prevention policies.

Diversion/cessation programs

1. Train school personnel or other groups working with the schools in the END program if there is interest in providing an educational alternative to punitive action for youth who break the school tobacco use policy and for youth who want to quit.
2. Provide schools with information on cessation programs for youth who express a desire to quit.
3. Provide information on adult cessation and encourage school districts to provide cessation for adult smokers.
4. Act as a liaison for the schools to get community support for diversion programs.
5. Engage schools in a community process to develop a system for the enforcement of the Youth Possession Law.

G. Increase community-based prevention programs

Objective Increase the effectiveness and number of community-based prevention programs through building partnerships and providing the community with access to best practice programs.

Audience Community-based programs working with youth

Background No one program or one sector involvement will reduce or prevent tobacco use to the degree necessary to meet TPCHD goals. Research shows that when all sectors of the community are involved in prevention from a multidisciplinary approach, we can delay the onset of tobacco use and in best case circumstances have that effect last through the high school years. Community programs are another powerful arena for reaching youth. Bringing best practice and promising practice programs to youth through the community extends the reach of the prevention activities. Engaging the entire community has been shown to be the best practice approach to reducing use.

Activities **Media literacy education project**

1. Develop project.
2. Procure outside funding.
3. Recruit partners.
4. Implement program.
5. Conduct evaluation of the effectiveness of the intervention.

Teens against Tobacco Use(TATU) - cross-age education training

1. Train trainers in organizations that are integrating this program into their broad-based community projects for youth.
2. Insure a system is in place to sustain the program and connect the youth to a broader prevention network.
3. Advise community groups using this program on the broader issues related tobacco Prevention and encourage them to include tobacco prevention as one of their goals.
4. Support community groups with minimal funding if funding is available.

Compliance checks (coordinate with Sam)

1. Recruit youth from organizations with youth groups to work with the compliance checks

- to insure that retailers are not selling tobacco products to minors.
- 2. Assist the partnering organizations with incorporating other tobacco prevention activities and programs into their overall goals and objectives.
- 3. Engage the community in rewarding and/or pressuring retailers who do or do not sell to youth.

H. Increase cessation attempts by smokers

Objective Increase the number of cessation services available to smokers.

Audience Smokers, health care community

Background Research tells us that nicotine in tobacco is as addictive as heroine and that it takes many smokers five or more attempts before they quit for good. Research also provides us with effective models to draw from to support smokers who want to quit. It is important to know the stages of change model as a framework for educating the community on the importance of cessation. Getting adults and older youth to quit is an important part of a comprehensive plan because 50% of youth that smoke have parents and older siblings who smoke.

Activities **4-A Model (a clinic-based cessation intervention)**

1. Promote the free training to MD's (Network Nurses)
2. Promote the free training to all non-MD health providers.
3. Contact the trainer.
4. Arrange the training's.
5. Conduct the training's.
6. Follow-up on implementation of program in the clinics.

Quit Line

1. Promote TPCHD's "Quit Line" where smokers can call and receive a free self-help cessation program, a list of community resources, and a list of insurance coverage for cessation programs.
2. Assess appropriate places in the community to put up posters and flyers promoting the line.
3. Send follow-up letters at 3-month intervals to people who have ordered the program.

Increase access to programs

1. Assess number of cessation programs in the community.
2. Find stakeholders interested in providing services.
3. Work with community to increase the communities access to programs.
4. Promote the programs.

Youth cessation programs

1. Promote the use of cessation/diversion programs in the schools and in the community.
2. Train trainers to conduct the END program.
3. Provide minimal funding to organizations offering the programs if funding available.

TPCHD Alcohol Misuse Prevention Overview

- Alcohol is consumed regularly by 56% of Pierce County adults. Most people accept consumption in moderation by adults over 21 as “normal”. While intoxication is not generally viewed favorably, it is broadly accepted, especially among young males. Intoxication during key social events such as weddings, graduations and sporting events does not generally elicit harsh negative responses. Recent research even suggests some health benefits of moderate alcohol consumption.
- Most communities are more concerned with the use of marijuana and other illicit substances by youth. Despite the fact that the public health costs of alcohol misuse far outweigh the costs of all other illicit substances combined, most people view alcohol as relatively benign. As a result, community efforts to prevent alcohol misuse have been limited and primarily focused on traffic-related consequences or treatment of alcohol-dependent individuals.
- In addition to individual constitutional factors and family/peer influences, a number of factors in the external social and physical environment contribute to initial alcohol use as well as continuing consumption patterns. The availability of alcohol and the visibility of its promotion play a significant role in maintaining community acceptance and incentives to purchase alcohol.
- The presence, visibility, and enforcement of laws and institutional policies that regulate alcohol consumption are critical elements of the alcohol misuse prevention plan. They contribute to a community climate that either fosters or discourages alcohol misuse.
- A primary objective of the alcohol plan will be to increase the capacity of the community to address alcohol misuse. Through a coordinated effort, community stakeholders will become increasingly knowledgeable about the significant death, injury and illness associated with alcohol misuse. Their commitment to address alcohol misuse will be increased, and they will be provided with the skills necessary to sustain effective prevention activities.
- Research-based models and frameworks (such as the risk and protective factor model) that have been shown to be important for all types of substance abuse prevention have been used to identify recommended plan activities. As a result, the plan is expected to reduce the initiation and abuse of other illicit substances in addition to alcohol.

TPCHD Alcohol Misuse Prevention Plan

I. Board of Health Objective

Reduce alcohol misuse by 20%. Misuse 5 or more drinks twice or more times in the previous 30 days.

The estimated direct annual health impact on Pierce County residents of achieving this objective will be:

55 fewer deaths	from 275 deaths per year to 220 deaths per year
759 fewer years of potential life lost	from 3,793 years of potential life lost to 3,034 years
2,555 fewer days of inpatient hospitalization	from 13,400 inpatient days to 10,845 days
3,285 fewer outpatient visits	from 48,700 outpatient visits to 45,415 visits

II. Plan Objectives

Prevent early initiation of alcohol consumption, especially among youth in grades 6-8

Early initiation of alcohol increases the likelihood of alcoholism, binge drinking, alcohol-related injury and alcohol-related disease. Children who begin consuming alcohol before age 15 are four times as likely to experience alcohol dependency as those who wait until they are 21. Reinforcing such information with parents, schools, and other venues in the community and providing the skills, information and other resources needed to reduce the incidence of experimentation is a primary preventive step that must be taken throughout the community with young children. Alcohol is also a “gateway” drug. Its early use is associated with an increased likelihood for using other illicit substances.

Reduce the prevalence of current alcohol misuse, especially among young adults 18-29

This age group has the highest prevalence of alcohol misuse and experiences the highest rates of alcohol-related injuries. Reducing alcohol consumption among intermittent heavy alcohol users will result in substantial public health benefit. Altering drinkers’ perceptions of the consequences of heavy drinking, reducing the social acceptability of heavy consumption, discouraging consumption during high risk activities, and strengthening policies that discourage excessive consumption are all necessary in order to reduce alcohol misuse.

III. Strategies

- **Increase community capacity to sustain effective alcohol misuse prevention efforts.**
- **Strengthen policies and change other environmental conditions that influence alcohol consumption.**
 - A. Conduct a countywide health communications campaign that supports moderate versus heavy alcohol consumption.
 - B. Reduce the availability of alcohol to underage youth.
 - C. Reduce the incidence of drinking and driving.
 - D. Develop and strengthen community networks committed to alcohol misuse prevention.
 - E. Increase screening and brief interventions by providers and other stakeholders.
 - F. Strengthen school-based prevention programs and policies.
 - G. Strengthen workplace alcohol policies.

IV. Priority Activities

A. Conduct a county-wide health communications campaign

- Objective** To reduce the volume of alcohol consumed by heavy drinkers on a single occasion.
Increase public awareness of the deleterious effects of alcohol misuse.
- Audience** Young working class adults 18-24, primarily male
- Background** One important way to increase perceptions among drinkers of the negative consequences of heavy alcohol consumption is to counteract the positive images of alcohol promoted by the alcohol industry. This requires the development and distribution of credible messages that are persuasive to young adults.
- Activities** **Focus Group Research**
1. Conduct 2 focus groups (one male, one female) of young adults who have been identified as intermittent heavy drinkers, but not clinically dependent.
 2. Determine language, symbols, credible messengers, and potential venues for reaching young people who are engaged in episodic heavy alcohol consumption.
- Message Design**
1. An advertising agency will develop concepts to be tested at follow-up focus groups.
 2. Final messages will be developed and appropriate media and venues will be chosen.
- Production and Distribution of Media Materials**
1. Venues under consideration for delivering the message include: point of sale educational materials in liquor stores or private alcohol retail outlets; posters in bathroom stalls of bars and clubs; theatre slides; and print ads in the entertainment section of newspapers popular with youth.
 2. PHSS Teams will assist in the placement of messages in their local communities.

B. Reduce the availability of alcohol

- Objective** Reduce both real and perceived availability of alcohol by underage youth.
Increase compliance of alcohol retailers with existing regulations.
Increase skills and commitment of community to reduce alcohol availability.
- Audience** Alcohol retailers, community stakeholders, parents and young adults
- Background** Youth obtain alcohol in three ways. Most underage youth obtain alcohol from older youth or young adults over 21 who provide or purchase it for them. Others purchase it themselves from retailers who are not diligent about checking for identification. A smaller percentage of youth obtain it from home, either with or without parental permission. Data from the Liquor Control Board shows that about 20% of attempts to purchase by underage youth are

successful. Youth who are “street wise” have much higher success rates because they know where, when and how to avoid getting caught. Reduction in actual or perceived availability leads to decreased reports of alcohol use among youth.

Activities

Enhance the effectiveness of Liquor Control Board compliance checks

1. Work with the Liquor Control Board and community groups to increase compliance checks of alcohol retailers.
2. Participate in Hospitality Resource Alliance efforts (Parkland/Spanaway) to collaborate with local alcohol retailers to reduce the incidence of alcohol misuse.
3. Identify community groups/members to educate retailers. Sample methods include:
 - Sending letters to non-compliant store owners
 - Meeting with store owners one-to-one
 - Acknowledging stores that do not sell during compliance checks
 - Working through the Chambers of Commerce to address alcohol concerns
 - Listing compliant and/or non-compliant outlets in community newspapers
 - Additional signage for supportive stores

Educate the public

1. Work with community groups to educate about:
 - Laws pertaining to supplying youth with alcohol
 - Laws pertaining to supply and accident responsibility
 - Role of alcohol-free events or locations (parks, etc.) to reduce alcohol-promoting environments.
2. Work with parents to educate about:
 - High rate of alcohol use among middle school children
 - Harmful effects of use with children
 - Alcohol as a gateway drug
 - Role of adult modeling and parental communications
3. Work with law enforcement
 - Encourage Minor in Possession enforcement
 - Encourage enforcement of other alcohol-related offenses
4. Enhance governmental and institutional policies
 - Investigate the initiation of new alcohol regulations/policies
 - Strengthen existing alcohol regulations/policies

C. Reduce alcohol consumption and driving

Objective Reduce one of the most serious fatal consequences of alcohol misuse – traffic collisions.

Audience Young adults 18-29

Background Alcohol-related crashes are the leading cause of death and injury for young adults. The State has embarked on a clear normative change education and enforcement campaign. There is increased enforcement of the new .08 laws for adults over 21 and the stricter “zero tolerance

laws for youth under 21. There were 700 alcohol-related collisions among under-21 youth in Pierce County between 1992-1996. Over 100 Pierce County youth under 21 are killed or injured each year.

Activities

Enhance the effectiveness of the State campaign

1. Increase knowledge and visibility of legal consequences of drinking and driving.
2. Increase the ability of law enforcement to address drinking and driving.
3. Increase signage regarding zero tolerance for under 21 drivers and .08 for over 21.
4. Encourage courts and judges to administer swift and certain punishment.
5. Use local newspapers to increase the visibility of alcohol and traffic issues.

Promote community awareness

1. Identify and support local groups working on drinking and driving issues.
2. Increase the size, scope, and effectiveness of efforts by MADD, SADD, and SAFTEY groups through promotion of messages locally and enhancing collaboration.

D. Develop and/or strengthen community networks to address alcohol misuse prevention

Objective Increase the capacity of local community efforts to address alcohol misuse.

Audience Key community substance abuse stakeholders in PHSS districts

Background Except for drinking and driving, alcohol misuse has not traditionally been a focal point for community action. Local efforts may not exist, may be ineffective, or may be uncoordinated. It is unlikely that alcohol misuse will be reduced without an increase in the capacity of local community groups to carry out effective and sustainable prevention activities in a coordinated manner. Effective local networks will reduce alcohol misuse and also reduce the abuse of other illicit substances.

Activities

Assessment

1. Gather list of potential stakeholders.
2. Determine the degree of stakeholders' awareness of the size, severity, patterns, causes and effective solutions.
3. Evaluate the degree of concern/commitment by stakeholders.
4. Assess the perceived confidence in terms of available skills and resources.
5. Gather data on local programs: number, size, reach, effectiveness and coordination.

Design and implement a plan for increasing awareness, commitment, resources and coordination

1. Provide the structure for presentations, training, facilitated group discussions, outside speakers, etc. to increase community readiness.
2. Determine what proportion of team efforts are best directed to increasing awareness, knowledge versus efforts to increase commitment skills, resources and coordination.
3. Consider which individuals/ organizations will most benefit from initiatives.
4. Use CD dollars to strengthen or sustain current programs, and assist with promotion, recruitment or retention of participants for effective programs.
5. Help the community to increase the visibility and reach of current activities, or assist with coordinating among community sectors.

Train local stakeholders

1. A two-day training will be provided for selected PHSS District staff in November, 1999 that will cover essential information and skills necessary to foster the development of an alcohol misuse prevention network in local communities.
2. Resources permitting in year 2000, PHSS District teams may identify up to 25 local district stakeholders who have both the commitment and the capacity to effect local alcohol misuse efforts. The training will provide participants with the knowledge and skills needed to develop and carry out an effective local alcohol misuse prevention strategy.

E. Increase screening and brief interventions by health providers and gatekeepers

Objective	Increase screening and counseling of persons who misuse alcohol.
Audience	Traditional and non-traditional health care providers, school counselors, after school program staff and others who have frequent contact with youth and/or young adults who are not necessarily alcohol dependent, but who engage in episodic heavy consumption
Background	Research demonstrates that even brief interventions with those who misuse alcohol can result in significant and long lasting reductions in the frequency and amount of their alcohol consumption. Brief intervention skills are also useful in working with clients who have other substance abuse problems.
Activities	<p>Promote brief intervention training skills to health care providers and others who have frequent contact with young adults</p> <ol style="list-style-type: none"> 1. Train staff who have direct contact with families/clients to effectively conduct brief interventions. 2. Promote identification and brief interventions among network providers and make logistical arrangements for providers who request training. 3. Promote identification and counseling among non-traditional providers and other key gatekeepers with frequent youth contact.

F. Strengthen school-based prevention

Objective	All middle schools will adopt and actively support comprehensive alcohol prevention curricula and policies that effectively reduce alcohol experimentation and abuse among their students. All post-secondary educational institutions will adopt and actively support comprehensive policies and practices to reduce alcohol misuse among their students.
Audience	Middle school principals, administrators and other school/district stakeholders Post-secondary school administrators, school health personnel and other stakeholders
Background	Educational institutions represent a controlled environment where large numbers of youth and young adults spend significant amounts of time. Most educational institutions have policies and practices that are intended to address alcohol use or misuse prevention. However, educational systems cannot accomplish this work in isolation. To reduce misuse in the surrounding community, educational institutions need to work closely with neighborhood community groups, law enforcement, businesses and others.

- Activities** **Assess current middle school and post-secondary school alcohol use/misuse prevention efforts**
1. Determine the existence, comprehensiveness, and effectiveness of curricula or policies that specifically address alcohol use/misuse prevention. Many model programs for alcohol have also been shown to be effective for other illicit substances.
- Promote inclusion of effective practices**
1. Provide information on model curricula or policies as needed.
 2. Promote or assist the Media Literacy Project in designated districts.
- Build capacity for effective prevention**
1. Support linkages between the school environment and the larger catchment area to enhance the reach and effectiveness of school policies.

G. Strengthen workplace alcohol policies

- Objective** Increase the scope and effectiveness of workplace alcohol policies.
- Audience** Local businesses
- Background** Workplace culture and norms have the potential to influence drinking behaviors at work and beyond the workplace. Most large employers make available treatment services for alcohol-dependent employees. However, there is a misconception about who is causing most of the problems in the workplace. Occasional heavy drinking by otherwise moderate drinkers may contribute as much or more to work/performance problems and productivity losses as do the alcohol-dependent drinkers.
- Activities** **Strengthening alcohol policies**
1. Provide information and support to assist employers in strengthening their alcohol policies, especially among employers with a high proportion of young adults between the ages of 18 to 29.
- Educate employers**
1. Provide education around the effectiveness of employee assistance programs and the effect of intermittent excessive alcohol consumption on productivity.
 2. Provide information on employer liability when alcohol is served at employee events.

TPCHD Violence Prevention Plan Overview

- The word “violence” encompasses many different issues. Violence can be interpersonal (homicide) or intra-personal (suicide). We can also describe violence by type of victim (elder abuse, child abuse) by victim/perpetrator relationships (domestic violence, random violence), the type of perpetrator (youth violence, gang violence), where the violence takes place (school or workplace), or the mechanism used to commit the violent act (firearm violence). We can even focus on violence that affects a particular part of the body (sexual assault). A definition of violence used by the Centers for Disease Control is “The threatened or actual use of physical or psychological force or power against another person, against oneself, or against groups that results in injury, death or deprivation.”
- Pierce County experiences a firearms homicide rate that is 84% greater than the state average (5.9 vs. 3.2/100,000 and a firearms assault rate (hospitalizations) 39% greater than the state average (5.7 vs. 4.1/100,00). Between 1992 and 1996 there were 190 firearm homicides, 49 of which occurred to youth under 19 years old. There were 30 unintentional firearm injury hospitalizations to youth under 19. National estimates suggest that there are three firearm injuries for every fatality, though we have only recently begun to track firearm injuries treated in emergency rooms. Homicide rates have been on the decline since their peak in 1993.
- In addition to individual factors and family /peer influences, a number of factors in the external social and physical environment contribute to the use of violence. The availability of firearms, the visibility of violence in the larger community, media reporting of violent events and violent entertainment media are contributors. Social determinants such as poverty, unemployment, inadequate housing, neighborhood disorganization, availability of alcohol and other substances, also help to create and sustain a violent community climate.
- Early prevention efforts that provide cognitive and emotional support as well as problem solving skills to young children reduce violent attitudes and behaviors. The resulting positive effects reduce all types of violence and are more cost effective than programs and services delivered later in life. For purposes of this plan, “early prevention efforts” refers to prevention strategies for families with children who are no older than 10. While there is nothing “magic” about the age of 10, it suggests that departmental prevention efforts should include activities that affect elementary school-age children in addition to infants, toddlers and pre-schoolers.
- The violence prevention plan acknowledges that the causes of violence are highly interconnected and that the entire community must be engaged in a focused and coordinated effort. Success relies upon the use of research-based strategies, knowledge and technical skill of staff, adequate departmental resources, relevant community assessment data, and approaches that are tailored to the community needs and resources. Success will ultimately be determined by the extent to which effective strategies are adopted and sustained by the communities of Pierce County.

TPCHD Violence Prevention Plan

I. Board of Health Objective

Reduce firearm-related violence by 15%.

The estimated direct annual impact on Pierce County residents of achieving this objective will be:

14 fewer deaths	from 95 deaths per year to 81 deaths per year
402 fewer years of potential life lost	from 2,679 YPLL to 2277 YPLL
109 fewer days of inpatient hospitalization	from 2 years inpatient morbidity to 1.7 years

II. Plan Objectives

Prevent the early initiation of violent behavior, especially among children under 10

Serious violent acts are primarily carried out by young adults, but the origins of violence are most often found in early childhood. By the time such behavior comes to the attention of law enforcement and the courts, violent individuals have established a pattern of thought and behavior that is very difficult to modify. Providing the necessary cognitive, emotional and environmental supports to young children will give them the necessary skills, attitudes and behaviors to solve problems non-violently.

Reduce the prevalence of serious violent acts by changing the community conditions that support them

Even with enough information, good skills, plenty of resources and the best of intentions, families alone cannot always raise children to be free from violence. The external social and physical environment also have significant affects on violent attitudes and behavior. Many communities are enthusiastic about reducing violence but there is little guidance for how best to use limited resources. The department will provide important information to communities about the size and patterns of violence in their community, provide information about effective methods to prevent it based on research, and offer leadership and support to help design and sustain effective community-wide violence prevention efforts.

III. Plan Strategies

- **Increase the reach, effectiveness, coordination and sustainability of programs and services designed to foster the healthy cognitive and emotional development of young children.**
 - **Increase the capacity of communities to initiate and coordinate effective and sustainable violence prevention efforts.**
- A. Promote increased use of the Pierce County Domestic Violence Helpline.
 - B. Promote the safe storage of handguns, especially among households with children.
 - C. Support and enhance early childhood and family programs/services.
 - D. Strengthen efforts to reduce adolescent suicides
 - E. Foster increased media and entertainment accountability.
 - F. Facilitate a countywide violence prevention summit and planning process

IV. Priority Activities

A. Promotion of the Pierce County Domestic Violence Helpline

Objective	<p>Increase number of calls to the Pierce County Domestic Violence helpline</p> <p>Raise awareness of domestic violence patterns & promising approaches</p> <p>Decrease community tolerance for domestic violence</p> <p>Increase capacity to deliver programs and services to victims</p> <p>Increase rate of identification and referral by health providers</p>
Audience	<p>Female victims of domestic violence</p> <p>Family, friends, colleagues, neighbors who are aware of abuse</p>
Background	<p>Reducing domestic violence may be considered intervention/treatment for those women who are already in a violent relationship. However, reducing the incidence of domestic violence should be considered primary prevention with respect to the presumed 40% of these relationships where children are living in the home. Witnessing violence and/or experiencing it directly are significant risk factors for adopting violent attitudes and behaviors later in life. While the media focus of this campaign is narrow (promoting the helpline), the campaign will encourage a broader discussion of the significance of domestic violence, provide opportunities to identify the need for additional programs and services, and suggest opportunities to increase commitment and coordination of prevention efforts. Calling the helpline is under the direct control of individuals and lends itself to media and outreach activities.</p>
Activities	<p>Encourage provider screening and referral</p> <ol style="list-style-type: none"> 1. Providers and home visit staff will be encouraged to screen and refer victims to helpline and other services and programs consistent with standardized protocols. 2. Develop materials to specifically address provider needs and barriers. <p>Produce a helpline media campaign for interior transit</p> <ol style="list-style-type: none"> 1. Develop/adapt promotional messages to encourage calls to the line. 2. Produce messages using in-house or contracted services. 3. Include tear pads with helpline information. 4. Place messages in the interiors of all Pierce Transit buses. 5. Monitor success of campaign through tear pad usage and calls to the line. <p>Develop and run a helpline promotion project focusing on women's restrooms</p> <ol style="list-style-type: none"> 1. Hire a part-time Domestic Violence Outreach Coordinator to oversee the project. 2. Develop helpline promotional messages based on previously held focus groups and literature regarding favored words and images by victims of domestic violence. 3. Design and produce posters and poster holders suitable for mounting in women's restrooms. Women are more likely to self refer in privacy away from the eyes of the batterer. 4. Identify areas with high traffic volumes (such as malls) and locations that serve women from populations deemed to be at higher than average risk for domestic violence (DSHS offices). 5. Obtain permission to use high traffic restrooms for placement of helpline posters throughout the community. Public restrooms in social service agencies, and other public buildings will be targeted as well as health care providers and businesses.

6. Identify volunteers to assist with installation and monitoring of card use. Identify organizations and individuals to “adopt” one or more restrooms to assist with replacing helpline cards and monitor and report on a monthly basis, the number of cards removed.
7. Install up to 500 posters with promotional materials in identified restroom locations by 12/31/99.
8. Utilize the visibility of the helpline promotion campaign to raise awareness about DV issues, to educate stakeholders or others in the community, to identify gaps in service and programs, and to assist in increasing capacity and coordination of necessary programs and services.
9. Monitor success of campaign through card usage and calls to the helpline.

B. Promote the use of safe storage devices among handgun owners

- Objective** Increase use of safe storage devices/practices by handgun owners
 Increase the awareness of the importance of safe handgun storage among handgun owners, especially those with children living at home.
 Decrease community tolerance for unsecured firearms in homes with children
 Increase collaboration with local businesses, law enforcement, block watch programs, advocacy groups, gun shops, firing ranges, providers, and others to promote safe storage.
- Audience** Male handgun owners with children under 18 living at home
 All firearms owners
- Background** There are many mechanisms of violence. Harsh words, fists, knives etc. all play an important role. Firearms, however, provide the user with a device that can kill instantly from a distance. In the wrong hands, firearms, especially handguns, cause tremendous human suffering. In Pierce County 36% of all households contain a firearm. Fifty-six percent of households with children contain an unlocked firearm and an estimated 31,000 children under 18 in Pierce county live in a home where an unlocked or loaded firearm is present. While continuing to support efforts countywide that address primary prevention and the support of non-violent norms, the department will seek opportunities to reduce the availability of firearms to children, adolescents and criminals through public education as well as support of law enforcement and other community efforts. The purchase and use of a safe storage device for handguns is under the direct control of most individuals. This in combination with the wide availability of effective products lends itself to a countywide media approach supported by local public education activities. While the focus on safe storage of firearms is narrow, the campaign is expected to provoke broader discussions of the role of firearm availability in violent behavior, provide opportunities to educate the public regarding the size, patterns and trends of violent use of firearms, and strengthen the individual, family and community factors that protect the community from firearm violence
- Activities** **Develop and distribute safe storage promotional messages**
1. Identify and contract with a focus group moderator.
 2. Develop screening tool and recruit handgun owners to participate in focus groups.
 3. Conduct focus groups with handgun owners to identify important considerations in the storage of firearms and preferred devices.
 4. Contract with ad agency to use focus group results to develop preliminary message concepts.
 5. Test concepts with additional focus groups Use focus groups to help identify credible messengers and locations where messages would most likely be seen and remembered.

6. Produce safe storage messages based on preferences from focus groups.
7. Determine venues for message distribution based on focus group.
8. Place print ads in selected newspapers and magazines. Develop a radio PSA.
9. Coordinate with other counties for radio, billboard or other “large media” approaches to promotion of safe storage by directing handgun owners to call a toll free 1-877-LOKITUP for product discount information.

Safe storage product promotions

1. Create a display of safe storage devices where concealed weapons permit applications are submitted.
2. Design, produce and distribute safe storage posters in gun shops, gun ranges, pawnshops etc.
Invite gun shop owners/managers to finalize the design.
3. Design, produce and distribute a brochure and flyer that describes the types of safe storage devices and how they work.
4. Design, produce and distribute a flyer in “Consumer Reports” style that provides information about specific device types, their features, price ranges, and where they may be obtained.
5. Promote discounted safety devices through block watch programs.
6. Test the effectiveness of a direct mail advertising to census tract or block groups with high incidence of gun ownership and use, directing them to call for product and discount information.
7. Monitor program success by tracking coupon redemption for the lock box discount program and reported firearm storage practices from statewide BRFSS.

Develop a supportive community network

1. Make presentations to service organizations and other community groups whose goals and objectives lend themselves to supporting safe storage.
2. Develop partnerships with gun shop owners, gun range owners, firearms safety instructors, pawn shops where firearms are sold, hardware stores, etc. and invite them to offer discounts and/or participate in disseminating the safe storage message.
3. Check with local safe or locksmith shops to determine whether they carry and would be willing to promote or discount safe storage devices.
4. Encourage chambers of commerce as well as representatives from law enforcement health care, individual businesses, and community groups to participate.
5. Invite local law enforcement groups to adopt or approve a lock box or other storage device for their own officers and to promote their use among block watch groups or firearm owners as a whole.
6. Form and maintain an effective countywide advisory group to support and extend the reach of the campaign.
7. Coordinate with Harborview, King, Snohomish and others with similar programs to share in materials development, printing and large media costs. *

Enhance traditional public health education practices

1. Encourage providers, especially family practice, pediatricians, clinic-based staff, and home visiting staff to ask clients about the presence of a firearm in the home, to advise about its proper storage, and to provide information about the availability of devices for doing so.
2. Clients will be encouraged to ask whether neighbors where children visit have accessible firearms.

3. Materials will be developed, adapted and/or promoted specifically for provider groups.
4. Provide safe storage devices to family-based staff for selective distribution to at-risk clients.

C. Early Childhood and Family Support

Objective	<p>Increase the reach, effectiveness, coordination and sustainability of primary prevention programs and services delivered on behalf of young children.</p> <p>Increase children's pro-social skills and cognitive (especially verbal) abilities.</p> <p>Increase the identification and referral of young children with problem behaviors. Increase community support to at-risk families with young children.</p> <p>Increase parent-child attachment and parental monitoring.</p>
Audience	<p>Mothers with young children under 11 with one or more risk factors (single, substance abuse, socially isolated, no family support, few or no job skills, poorly educated etc.)</p> <p>Children with multiple risk factors under 11 years old</p>
Background	<p>Promoting resilient attitudes and behaviors that protect against violent behavior is accomplished most cost-effectively during the first few years of life. If efforts are successful, children will be much less likely to engage in all forms of violence, interpersonal aggression as well as self-inflicted injuries. Because the greatest influence on young children's violent behavior comes from their caregivers, the primary focus of this effort will be on the family. Early school experiences and supportive community programs, services and environments that affect young children are also critical. Family support center activities and other community –based efforts are already underway to address these issues but recruitment, retention and follow-up is difficult and services and programs may be fragmented. This campaign reinforces existing community efforts and also encourages communities to focus attention and resources on primary prevention rather than more difficult, costly and less effective later interventions.</p>
Activities	<p>Support community-level efforts</p> <ol style="list-style-type: none"> 1. Inform community organizations of the critical link between decreased community support of families with young children and future violence. 2. Provide information to the community about early child development, including neurobiological and biobehavioral effects which influence later behavior, as well as local and county data regarding child abuse and neglect, the incidence of single parenthood etc. 3. Elicit support to expand existing programs and services or initiate new ones such as literacy programs, structured after-school recreation, "big brother" programs, more accessible childcare, transportation for mothers to attend parenting skills classes or other family support services and programs, job skills training for single parents etc. <p>Preschool /elementary school prevention</p> <ol style="list-style-type: none"> 1. Encourage "whole school" approaches that change the entire climate in which students perform. Foster the development of links with agencies outside of the school to increase the effects of curricular efforts. 2. Discourage curricular approaches alone, but provide technical assistance for identifying which violence prevention curricula are most effective. Use the resource manual from

“Drug Strategies” as well as other resources identified by Prevention Coordinators for recommendations.

3. Promote a comprehensive system to identify, screen and refer young children with behavioral problems such as aggression, poor school performance, etc. that are predictors for future violence.
4. Support school efforts to provide extra-curricular tutoring for children with academic problems. Facilitate cross-age tutoring from students in older grades where appropriate. Assist in the recruitment of volunteers to enhance existing tutoring programs.

Enhance existing efforts to support families with young children

1. Support the expansion and reach of effective services and programs.
2. Increase participation in parenting skills programs and other family support services that contribute to the alleviation of family management problems. Help identify potential trainees for CAPR or other parenting resource agencies.
3. Improve access to job/skills training.
4. Improve access to substance abuse treatment.
5. Increase the reach, effectiveness and participation of support groups for single parents, substance abuse recovering parents and other at-risk families.
6. Foster the development and maintenance of recreational and social activities that increase the opportunities for at-risk youth under 11 to participate, to achieve positive sustainable relationships with adults and to receive acknowledgement and rewards for positive behaviors.
7. Increase the opportunities for early cognitive development through literacy programs, tutoring and positive socialization experiences.
8. Assist in the promotion of programs and services to increase their visibility to at-risk families. Identify key elements of programs that are important to families and assure that these are highlighted (child care, meals, interactivity, transportation, etc).

Reduce barriers to existing programs and services to make them more acceptable

1. Remove physical, financial, social, language and other barriers to participation in existing family-centered activities, programs and services.
2. Arrange for programs and services to be delivered closer to areas where families can make use of them.
3. Facilitate car pooling, volunteer rideshare, reduced transit fares, and other transportation support alternatives. Recruit volunteers or investigate alternative methods to reduce transportation barriers.

D. Strengthen efforts to reduce adolescent suicide

Objective Reduce the rate of adolescent suicide

Audience All community sectors

Background Suicide is responsible for more firearm-related deaths in Pierce County than homicide, and adolescent suicide has grown in recent years, surpassing deaths from motor vehicle collisions. Public awareness of this issue is disproportionately low compared to public health costs and years of life lost. There is a growing national consensus, and even a draft national

plan, which provides guidance about what activities are likely to be effective at reducing this problem.

- Activities**
1. Develop a media and local outreach campaign to increase public awareness of the magnitude of the suicide problem, warning signs and referral resources.
 2. Implement research-based guidelines for prevention among families, schools and communities.
 3. Train gatekeepers to identify, screen and refer appropriately.
 4. Extend the visibility and acceptability of “crisis” lines.
 5. Increase the skills of youth to recognize warning signs and provide support to their peers.

E. Foster greater news and entertainment media accountability

Objective Decrease the graphic reporting and portrayal of violence in the printed and electronic media.

Audience Representatives of print and electronic media

Background Primarily to increase the accountability of the news and entertainment media for the manner in which violence is reported and displayed. Public awareness of the role of media portrayals as a risk factor for violence has increased. Professional as well as governmental bodies are increasingly calling for greater accountability. TPCHD leadership could bring focus to this discussion and improve the manner in which violence is portrayed locally, and perhaps even regionally. This initiative will also fit well with increased departmental focus on the anticipated use of media advocacy to further its broader prevention agenda.

- Activities**
1. Identification of key stakeholders among local media.
 2. Encourage the adoption of local reporting standards for violence.
 3. Implement methods to monitor and reward reporting (form a media “watchdog” organization, establish annual “media prevention” awards, etc.)

F. Facilitate a countywide violence prevention summit and planning process

Objective To facilitate the development of a county wide violence prevention plan and implementation strategy

Audience Key countywide violence prevention stakeholders

Background If current and planned departmental activities are successful, violence prevention stakeholders from throughout the county will be prepared to engage in developing a common countywide vision as well as a specific implementation strategy that utilizes research based programs, the unique capacities of each community sector, and the most effective features of current programs and services. With countywide planning, competition for grant and other funding can be minimized as optimal coordination is achieved.

- Activities**
1. Identification of county and district-level violence prevention stakeholders.
 2. Deliver presentations to stakeholders on the magnitude of violence, causes and effective violence prevention strategies.

3. Build consensus for a process to reach a countywide violence prevention vision.
4. Establish topic specific task forces.
5. Plan and hold the summit.
6. Provide support for countywide adoption of a written plan and implementation strategy.
7. Provide support for ongoing coordinated efforts.

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